Fibromyalgia and the Treatment of Chronic Pain

Use of Ghost Points in an Interview with Dr. Hu Ling Xiang

by Adam Burke, PhD, MPH, LAc and Jason Satterfield, PhD

Chronic Pain Prevalence

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hronic pain is a major health concern in the US. Pain from low back trauma, arthritis, fibromyalgia and serious illnesses such as cancer affects millions of Americans. For example, fibromyalgia syndrome, a chronic musculoskeletal pain disorder, affects an estimated 6-10 million people, or 2-3% of the population (Wolfe et al, 1995). Fibromyalgia is characterized by widespread muscle pain and may include myofascial trigger points, abnormal pain sensitivity, muscle weakness, insomnia, fatigue, cognitive impairment, depression, and anxiety. Fibromyalgia is often associated with other disorders such as migraine, irritable bowel syndrome, interstitial cystitis and chronic fatigue (Bradley et al 2002). Individual and societal costs include reduced work productivity, reduced employment and income, psychological distress, high utilization of health care services, and increased disability and insurance costs. Fibromyalgia is one of the most clinically and economically costly pain syndromes in the US healthcare system (Berman & Swyers, 1997; White, Speechley, Harth, & Ostbye, 1999).

Fibromyalgia Etiology

There is currently no generally accepted etiological model for fibromyalgia. Multiple studies suggest a role of genetics, central sensitivity syndromes, neuroendocrine dysregulation, and sleep abnormalities (Ang & Wilkes, 1999). In contrast to rheumatoid arthritis, fibromyalgia patients are more likely to be diagnosed with major depression or anxiety disorders and to have a higher family prevalence of major affective disorders (Hudson, Goldenberg, Pope et al, 1992). Although psychiatric or psychosocial factors independently cannot account for the onset or course of fibromyalgia, they may play an important interdependent role.

Treatment of Fibromyalgia

No curative treatment for fibromyalgia currently exists. Symptom management strategies suffer from a lack of certainty, with no single treatment having proven to be superior or dramatically successful. The main treatments for fibromyalgia that have shown some degree of efficacy in clinical studies include education, relaxation, pharmacotherapy, acupuncture and exercise therapy (Berman, Swyers, & Kernan, 1999; Ernst, 2000; Sim & Adams, 1999, 2002). The use of alternative therapies among individuals with chronic health problems, such as rheumatology patients, is widespread and growing (Croxford & Appleton, 2001). Berman et al (1999) report the most typical alternative medical therapies used by fibromyalgia patients to be: mind-body methods, acupuncture, and manipulative therapies.

Dr. Hu Ling Xiang and Ghost Points

Dr. Hu Ling Xiang was interviewed in June 2002 and asked to describe her approach to treating chronic pain conditions. Dr. Hu is a professor of clinical acupuncture at the Chengdu University of Traditional Chinese Medicine located in Sichuan, China. She has been in practice for over 30 years and is widely respected for her skills in treating psychiatric disorders and musculoskeletal problems. In addition to working in the university hospital, she also serves as a faculty member in the graduate program and periodically teaches advanced seminars in Europe.

Approximately 20% of her work involves treating patients with psychiatric concerns including depression, anxiety disorders, mania and dementia of old age. The rest of her clinical practice focuses on bi syndrome (pain conditions in addition to using Ghost Points in the treatment of psychiatric problems Dr. Hu has also pioneered the use of these points with chronic pain conditions.

Q: How do you view psychiatric disorders?

Dr. Hu: Many psychiatric disorders result from qi disturbance. Consequently acupuncture can be very effective in treating such disorders as it can be used to re-establish the free flow of qi. To treat such conditions in each case you make a differential diagnosis to determine which organ is damaged. Once this is known the first step is to then normalize the flow of qi. Then you treat the damaged organ through tonification and sedation. Finally, you use appropriately indicated points and treatments to help normalize the specific mental state. You want to regulate qi, tonify or sedate the involved organ, and treat the specific psychiatric symptoms with appropriate methods. You also need to look for other contributing factors, such as significant marital problems.
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Q: When did you start working with Ghost Points?

Dr. Hu: Ten years ago, some of my students began asking questions about Ghost Points. I started to research the classics to learn more about their origin and application. Ghost Points got their name as it was believed that people had a soul. When they became mentally ill, it was thought to be the result of inhabitation by a ghost. The points which best affected a cure for these people came to be called Ghost Points. Sun Si Miao* of the Tang Dynasty codified the 13 Ghost Points**. He specified the sequence of points, their indications, recommended needling depth, and gave the name to each point. The first four points were to be used in the sequential order Sun Si Miao recommended. Beyond that, the points could be used as indicated. For cases of mental illness, only four points were used initially, and depending on patient tolerance, more were added during later treatments. The number of treatments needed depended on the severity of the illness, the duration of the symptoms, the patient's age, overall health, and how their condition responded.

Q: How do you typically use Ghost Points?

Dr. Hu: One of my main uses for Ghost Points is in the treatment of chronic pain. When treating patients with chronic pain, you want to normalize the mental state. This helps to reduce sensitivity to the pain. Many people who have chronic pain suffer from depression. It is not clear if the depression causes the pain, or if the pain causes the depression, probably both are true. People with chronic health problems worry about their condition. Adding Ghost Points allows them to feel better, and helps to control the symptoms more quickly and to reduce the chance of recurrence. Many of these patients are also seeking to reduce dependence of western pain medications, which are either not effective or not well tolerated. When treating chronic pain, you select a Ghost Point on the meridian you are using for the pain treatment. Ghost Points are located on several channels. You can usually find one that will be a useful addition to the treatment. In that way, you are using the same point to regulate qi, treat the organ, and normalize the mental state. My treatment strategy for chronic pain is to always include at least one Ghost Point. Often that is enough.

*Sun Si Miao

Sun Si Miao (581-682AD) was one of the great physician/scholars of the Tang Dynasty (618-906AD). This period of Chinese history has been referred to as the second golden age. During this time, the country was unified and prosperous and experienced extensive cultural and intellectual advancement. Sun Si Miao is recognized as the practitioner who first advocated diet, lifestyle and balanced activity as keys to health and longevity. If these methods were not sufficient, one could then resort to herbs and acupuncture for additional support. Sun Si Miao is also credited with the concept of the Ashi ("Ouch") point, areas tender upon palpation. These Ashi locations may not be acupuncture points but can be used as such for the treatment of pain. In addition to his contributions to herbal formulations, and acupuncture education, he codified the 13 Ghost Points for the treatment of psychiatric conditions.

**Sun Si Miao's 13 Ghost Points

GV 26 - Ghost Palace; LU 11 - Ghost Message; SP 1 - Ghost Fortress; PC 7 - Ghost Heart; BL 62 - Ghost Road; GV 16 - Ghost Pillow; ST 6 - Ghost Bed; CV 24 - Ghost Market; PC 8 - Ghost Cave; GV 23 - Ghost Hall; CV 11 - Ghost Hidden; Li 11 - Ghost Official; Hai Quan - Ghost Seat (extra point under the tongue in the center of the frenum linguae).

References


